



**CONTRA COSTA COUNTY**  
**Department of Conservation & Development**  
**Community Development Division**

**KENSINGTON DESIGN REVIEW APPLICATION**

**TO BE COMPLETED BY OWNER OR APPLICANT**

OWNER	APPLICANT
Name	Name
Address	Address
City, State/Zip	City, State/Zip
Phone _____ email _____	Phone _____ email _____
By signing below, owner agrees to pay all costs, including any accrued interest, if the applicant does not pay costs. <input type="checkbox"/> Check here if billings are to be sent to applicant rather than owner.	By signing below, applicant agrees to pay all costs for processing this application plus any accrued interest if the costs are not paid within 30 days of invoicing.
Owner's Signature _____	Applicant's Signature _____

*Design review approval only applies to the design as submitted with this application.  
Filing for another design review application shall be required if any design changes are sought.*

CONTACT PERSON (optional)	PROJECT DATA
Name	Total Parcel Size:
Address	Existing Gross Floor Area:
City, State/Zip	Proposed New Gross Floor Area:
Phone _____ email _____	Proposed Total Gross Floor Area:
	(see "Gross floor area" definition – County Code Chapter 84-74.404(h))

Request description (attach supplemental statement if necessary):

**↓ FOR OFFICE USE ONLY ↓**

Project description:

Property description:

Ordinance Ref.: 84-74.10	TYPE OF FEE	FEE	CODE	Assessor's #:
Fire District: <b>KENSINGTON</b>	*Base Fee (if under FAR threshold)	500.00	S-036B	Site Address:
Sphere of Influence:	**Development Plan Deposit (if FAR threshold is exceeded)	1,000.00	S-036X	Zoning District:
Supervisory District: 1	Late Filing Penalty (50% of above, if applicable)	.	S-066	Census Tract:
x-ref Files:	Environmental Health Dept.	47.00		General Plan:
	Notification Fee	30.00	S-052B	
Concurrent Files:				Received by:
	<b>TOTAL</b>	\$		Date Filed:
	<b>Receipt</b>	#		<b>File #</b>

\*Filing for a Development Plan is required if a hearing is requested and the applicant/owner opts to further pursue the request. An additional deposit of \$1000 (\*\*) is required for filing a Development Plan if a hearing is requested relative to a project for which a hearing was not triggered by exceeding the FAR threshold.

\*\*The actual fee for a Development Plan is time and materials. Submission of additional materials may also be required.

**INSTRUCTIONS ON REVERSE**

## SUBMITTING YOUR APPLICATION

1. PREPARE a plot (site) plan, floor plans and building elevations clearly and legibly drawn to a commonly used scale with the following information, and verify (by initialing) that the information is included on the plans:

Applicant's  
Initials

### **Plot (site) Plan**

- \_\_\_\_\_ a. All existing property lines, labeled and fully dimensioned.  
\_\_\_\_\_ b. All public and private roads, easements and drainage installations on and adjacent to the subject parcel(s).  
\_\_\_\_\_ c. All existing and proposed improvements with distances to all property lines dimensioned.  
\_\_\_\_\_ d. Distance from property lines to existing improvements on parcels adjoining the subject parcel(s).  
\_\_\_\_\_ e. Topographic contours labeled with elevation, known geologic hazards, creeks/streams and drainage ditches.  
**Verification of proposed peak building elevation heights (including wet stamp from a certified architect or engineer) may be required.**

- \_\_\_\_\_ f. Location, species, drip lines, and trunk diameters of all trees with a diameter of 6 inches or greater, measured 4½ feet above ground whose trunks lie within 50 feet of any proposed improvements. This shall include all such trees on the subject property as well as trees on adjoining properties whose canopies extend onto the subject property. Number the trees for identification purposes and indicate if they are to be removed or altered in any way.  
\_\_\_\_\_ g. North arrow and scale.  
\_\_\_\_\_ h. Existing and proposed parking layouts, driveways and landscaped areas (all fully dimensioned).  
\_\_\_\_\_ i. Computations of lot area, lot coverage, gross floor area and landscaped areas (all indicated in square feet).  
*This may require verification including a wet stamp from a certified architect or engineer.*

### **Floor Plans**

- \_\_\_\_\_ j. All rooms, hallways and other common areas with their dimensions and use (i.e. bedroom, kitchen, etc.) labeled.  
\_\_\_\_\_ k. Locations of doorways, stairways and landings, windows, permanent fixtures (sinks, toilets, showers, etc.) and major mechanical equipment (hot water heaters, furnaces, etc.).

### **Complete Building Elevations**

- \_\_\_\_\_ l. Exterior dimensions (height, width, depth) for all sides of structure(s) including proposed improvements. Height is measured at the point within the building footprint that has the greatest distance between the ground and the highest point of the building directly above.  
\_\_\_\_\_ m. Proposed exterior ornamentation such as shutters, planting boxes, window trim, cornices, railings, etc.  
\_\_\_\_\_ n. Proposed exterior materials (i.e. wood siding, stucco, stone veneer, concrete tile roof, etc.).

2. HAND DELIVER (do not mail) the following to the Contra Costa County Application & Permit Center:

- \_\_\_\_\_ o. **Development Plan:** 3 full-size sets of plans (no larger than 24" x 36") and 12 reduced sets (11" x 17")  
**Design Review:** 1 full-size set of plans (no larger than 24" x 36") and 1 reduced set (11" x 17")  
All sets must be folded to approximately 8½" x 11". **Rolled plans will not be accepted.**  
\_\_\_\_\_ p. Completed application form (reverse side of this sheet).  
\_\_\_\_\_ q. "Important Notice to Applicants" (blue form) signed and dated.  
\_\_\_\_\_ r. \*Required deposit and miscellaneous fees. Please make checks payable to **Contra Costa County**.

\* Please note that the fees described on this form are related only to the Contra Costa County Community Development and Public Works [(925) 313-2000] departments' costs for processing your application. Additional fees and requirements may be imposed by federal, state and local agencies that may be involved in reviewing your project. It is the applicant's responsibility to investigate whether additional fees and requirements will be imposed.

## **APPLICANT VERIFICATION**

I verify that all the information submitted as indicated by my initials is complete and accurate to the best of my knowledge and further acknowledge that should it be found that any of the information is incorrect or incomplete that it may result in increased processing time and/or costs. I acknowledge that all staff costs are borne by the applicant and that, if necessary, additional deposits will be required. I also acknowledge that I have completely read this form and understand all the information stated herein.

Signature

Name (print)

Date

Contra Costa County - Community Development Division  
Application & Permit Center  
651 Pine Street, North Wing - 2nd Floor  
Martinez, CA 94553  
(925) 335-1381